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ABSTRACT

Based on a study by the Department of Community Service Education, Cornell University, to evaluate human service planning (HSP) nationwide, this paper discusses the premises that HSP may be defined as community learning and that the community (according to the Robert Boyd and Jerold Apps model for adult education) is both a beneficiary of and participant in such learning. The function of HSP as stated here is to assist decision-makers responsible for acting in the public interest to perceive and evaluate decision alternatives, i.e., to learn. As illustrations of different learning strategies, the organization of human services planning in three states is examined: Illinois' independent agencies, each of which does its own planning; Kentucky's integrated umbrella agency; and Massachusetts' coordination of agencies under a secretariat. The limitations and advantages of each strategy are discussed as well as the distribution of learning duties within the organizations. To assess the extent, duration, and applicability of community learning, it is suggested that tangible evidence (such as (1) decisions and plans, (2) changes in services offered, (3) increased predictability in outcomes, (4) greater interagency coordination, (5) improved ratio of benefits to costs, and (6) broader acceptance of involvement in HSP) be analyzed. (EG)

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Joan Wright

TO THE EDUCATIONAL RESOURCES
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HUMAN SERVICE PLANNING
AS A
COLLECTIVE ADULT LEARNING EXPERIENCE

by

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Introduction

Having been an adult educator in the context of community services for many years, the question, "What is the relationship of adult education to community services?", is a familiar one to me. Of the three aspects of that relationship that I have identified, two appeared to be acceptable and relatively comprehensible to my colleagues. The first, adult education as a service to the community, can be easily exemplified by adult education programs with which most persons are familiar. The second, adult education as a maintenance function of all organizations, can be described in terms of staff development and volunteer training in community service organizations.

The third aspect of the relationship between adult education and community services has been more difficult to describe, but to me it is the most interesting. It includes the processes by which a community learns to recognize and respond to the needs and interests of its citizens by providing services, community services. These processes obviously involve adults and learning, and may therefore be considered within the rubric of adult education. Credit is due to Boyd and Apps,¹ however, for providing a framework within which the phenomenon can be formally defined.

The Boyd and Apps paradigm is a two-dimensional classification schema in which the categories on one dimension describe the transactional mode of learning, and those on the second describe the client focus (see Figure 1). A third dimension, not yet fully developed, permits examination of systemic influences on each of the cells in the matrix thus formed.

¹Boyd, Robert, and Jerold Apps, "A Conceptual Model for Adult Education", Madison, WI: University of Wisconsin, March 1976 (mimeo).

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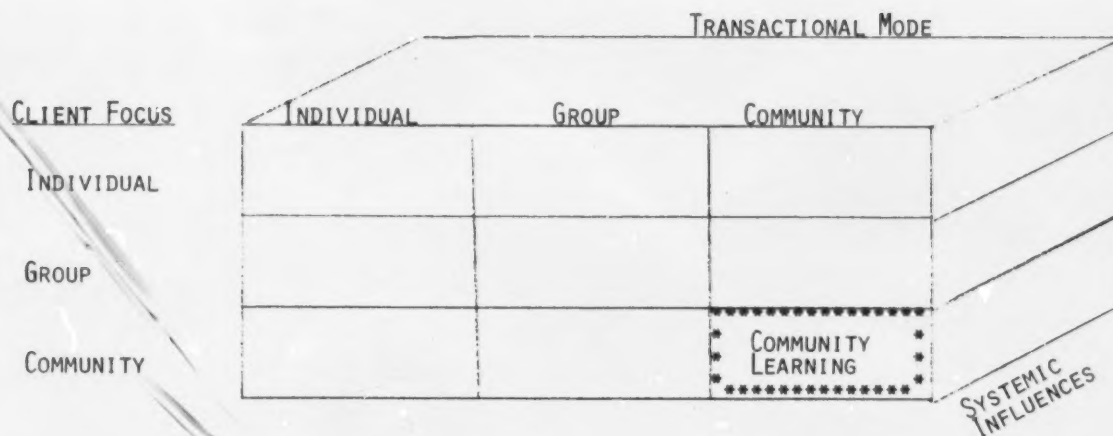
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FIGURE 1. CONCEPTUAL MODEL FOR ADULT EDUCATION



The cell in which I am interested, and to which this paper pertains, is that in which both transactional mode and client focus involve the community as a primary actor. This paper will illustrate the meaning of those dimensions within the context of human service planning. Following the illustrations, I should like to return to the challenges and opportunities which the concept of community learning offers for research.

Background, Original Study

The study from which the descriptive data for this paper are drawn was conducted in 1976-77 by an interdisciplinary group at Cornell University under a contract with DHEW to evaluate human service planning in the fifty states.² Planning, for purposes of that study, was defined as any activity directed to the preparation of information and decision alternatives for policy development, resource allocation, and program operation for specified human services³ to a defined population over a period of time. Two sources of data were employed--persons and documents. The documents used included:

- 1) Federally required state plans for Title XX of the Social Security Amendments, Older American Act, Comprehensive Employment and Training Act, Vocational Education, Community Mental Health, and the National Health Planning and Resource Development Act;

²For a fuller account of the project, see FINAL REPORT: EVALUATION OF HUMAN SERVICE PLANNING APPROACHES AT STATE AND LOCAL LEVELS. Ithaca, NY: Cornell University, Department of Community Service Education, November 1977.

³The human services examined in this study were social services and income maintenance; health and mental health; employment and manpower; vocational education; and services for the elderly.

- 2) Guidelines, designs and formats for planning that were being used in the human service agencies contacted; and
- 3) Related studies, legislation, articles and reviews of human service planning in state and local settings.

On-site interviews in nine states, selected to represent geographic, political, and structural variations, were conducted with informants identified by a key contact person in each state. Generally included in the on-site interviews were:

- major planner(s) in the human service umbrella agency, where such an agency existed;
- major planners in state line agencies of social services (Title XX), health, mental health, manpower (CETA), vocational education, services for the aging, where such human service agencies existed;
- human service planners, if any, in the state planning agency;
- key official in state budget office involved in human services;
- key official in Governor's office involved in human services;
- key official in legislative research staff concerned with human services; and
- others.

Three perspectives were thus involved:

- 1) Planners--persons whose primary work involved the preparation and production of planning outputs;
- 2) Managers--persons who requested and/or consumed the outputs of planners; and
- 3) Externals--persons apart from the direct manager-planner relationships who had a stake in and/or who interacted with planning.

The number of interviews conducted in a state varied from 10 to 23.

Preparation for the site visit interviews included review of each state's planning documents and briefing by the key contact person for each state, in addition to training in the use of semi-structured elite interviewing techniques. Debriefing sessions were held among the interviewers each day in the field to identify areas in which further information or clarification were needed, and to share information helpful in writing up the interview notes.

Information from document analysis and informant interviews were collected around the following set of planning descriptors:

- 1) the outputs or products of planning;
- 2) the goals (broad purposes of planning);
- 3) the scope of planning (comprehensive vs. single program);
- 4) the functions served by planning (i.e. policy, allocative, or program planning)

- 5) the methods and techniques of planning (including the range and contributions of participants in the planning effort, and the management of planning);
- 6) the environment of planning (with emphasis on constraints and supports);
- 7) criteria for judging the success of planning.

Summaries of findings for each of these descriptors for state planning agencies, state human service agency planning, and sub-state human service planning are contained in the final report.⁴

The following analysis is a highly condensed description of human service planning in each of three site visit states. It should be kept in mind that the conduct of planning is dynamic, easily shifted by economic, political, and personal influences as well as by advancements in technology, and knowledge and skill gained from experience. The characterizations below represent a picture of planning taken at a previous point in time, and do not purport to reflect a current state of affairs.

Framework of Current Analysis

In order to fit within the Community-Community cell in the Boyd and Apps matrix, and thus to qualify as community learning, participants in a learning process (transactional mode) must be viewed not as individuals or groups, but as the community. Similarly, the beneficiary (client focus) must be the community, and not individuals or groups. The rationale for defining human service planning (HSP) as community learning rests on two premises:

- 1) that the participants in HSP are defined by their status in one of three publics necessarily involved in community--
 - a) official publics, i.e. individuals or organizations duly authorized by the community to act in its behalf;
 - b) interested publics, i.e. aggregates of persons who share a recognition of and commitment to a common interest; and
 - c) general public, i.e. persons whose interests cannot be distinguished in a particular decision situation and/or whose interests are inferred only at the most general level;
- 2) that the generic function of HSP is to assist decision-makers charged with responsibility for acting in the public interest to perceive and evaluate decision alternatives--in short, to learn.

⁴FINAL REPORT, op. cit.

Planning not only facilitates the learning of others, it is itself a learning process. In order to prepare the documents, recommendations, guidelines, etc. that are the products of planning, planners necessarily must engage in various forms of inquiry. Generic questions around which learning is organized include:

<u>Descriptive questions</u>	<u>Prescriptive questions</u>
(Allocative and Operational Planning)	(Policy Planning)
What needs for service exist?	Which needs should be addressed?
What resources exist? Where are they presently allocated?	Where should resources be allocated?
What is each agency doing?	What should each be doing?
What goals are presently sought?	What goals should be sought?
How well are our services doing? How can they be improved?	What criteria should be used to judge?
What problems exist? How solve?	
Who cares about what?	

Assuming, then, that HSP may be defined as community learning, for each example of HSP one can ask the following questions:

- 1) What strategy of learning/planning has been observed for the state as a whole?
How has the state organized its HSP efforts?
- 2) Given that strategy, who can be expected to learn what?
- 3) What are the limitations and advantages of that strategy, given the constraints present in the situation in which it was observed?

The three states selected represent 3 variants in the organization of human service delivery--independent line agencies, an integrated 'umbrella' agency, and a secretariat performing coordinative functions for separate line agencies.

Illinois

In Illinois human services are provided by separate single-purpose agencies, each of which does its own planning. The extent of planning varies from agency to agency, with each focusing on the questions about which it is most concerned, each making its own arrangements for public participation in planning (if any) at the state and local level, and each employing its own terminology, data sources, and means of data processing. This situation is not unlike the variance in extent and sophistication of effort one might encounter in examining learning projects undertaken by individual adults. In this case, however, the learners are agencies responsible to the public for achieving public goods with public resources.

It is obvious, in this kind of fragmented learning, that the state as an entity

does not benefit from the diverse efforts described, unless one assumes that each agency's efforts at inquiry would ultimately prove beneficial to the people of the state, as the agency learned/planned to improve its own services. This assumption does not satisfy demands on the state that it be able to answer questions such as where its resources are being or will be spent, or to what ends human services are contributing. With increasing demands for accountability it is not surprising that the state legislature passed in 1975 a bill (HB 612) which requires the state's human service agencies to engage in a standardized planning process resulting in the production of an annual state plan for human services.

The strategy for this learning/planning process has been designed by the state planning agency, the Office of Planning in the Bureau of the Budget. It calls for a plan covering 5 years--the program and budget experience of the current and immediate past fiscal years, the allocation request and program plan for the next fiscal year, and a projection of service options with budgetary implications for 2 forward years. The planning process is divided into 2 parts--the first sets out baseline information for 3 (past, present, and next) fiscal years, and the second describes program choices (options) for 2 forward years. Guidelines for 612 specify standard definitions and data sources as one way to build a bank of consistent information available to decision-makers. The inclusion of the service options for 2 forward years is an effort to avoid over-reliance on projection of present operations. Emphasis on a descriptive process presumably encourages awareness of the total human service field and illuminates problems and gaps. This, plus consistent data and folding-in of more narrowly focused planning efforts, is supposed to build coordination and agency capacity for tactical (operational) planning.

Like all states, Illinois is required to submit a comprehensive annual services plan covering all services funded under Title XX of the Social Security Amendments. The Department of Public Assistance in Illinois has been designated as the coordinator for preparation of the Title XX plan. As such it collects plan components from each of 10 separate state agencies involved in TXX services, and attempts to put them together in the required format. A number of problems have been encountered: the Title XX planning cycle does not correspond with that of the 612 process, making a separate effort necessary; the eligibility criteria used by the agencies do not all conform to TXX regulations for funding; the terminology required by Title XX is not standard across all agencies; there is resentment that Title XX planning receives less attention than the state 612 planning process.

The state planning agency has attempted to counter these 'learning problems' by establishing (under the Governor's auspices) an interagency task force to agree on

standard terminology and to develop information systems that would accommodate both TXX requirements and agencies' options in eligibility criteria. Through these activities the task force would, it is assumed, build awareness on the part of each participant of the other agencies' activities, thus creating an opportunity for greater voluntary rather than imposed coordination among agencies. The 612 plan itself employs Title XX terminology, recognizing the significance of the federal mandate but not yielding state initiative to the feds. The idea of using the TXX plan as a preliminary version of the 612 plan, with continuing refinement from one projection to the next, had been sown informally and was beginning to germinate in a few of the agencies visited.

The increased drain on resources and potential loss of autonomy feared by line agencies in moving from planning only for their own agencies following their own 'needs-to-know' to participation in planning that would benefit the state or federal government's need-to-know are obstacles that are not easily overcome. One of the supports for agency involvement in state human service planning/learning that was being initiated at the time of the site visit was the Governor's development of a Sub-cabinet made up of the heads of the human service agencies. This group was to be charged with policy planning--the determination of the overall prescriptions for human services in the state. By this strategy of permitting each agency head to assume an influential position in the definition of and negotiation among policy alternatives, several outcomes could be hypothesized, including:

- 1) the Directors could not afford to maintain a separatist stance and thus jeopardize their agencies' relative standings in the development of priorities;
- 2) the Directors would begin to perceive superordinate goals toward which their agencies might contribute, rather than maintaining a competitive 'zero-sum' perspective;
- 3) the Directors would increase their appreciation of and dependence on planning as an information-providing (learning) activity which benefitted both the state and the agency;
- 4) the Directors would be in positions to point out specific areas for improvement of the planning process, thus 'learning to learn';
- 5) the Sub-cabinet would be an additional means by which the Governor's office might be continuously apprised of present and emerging interests of people in the state;
- 6) executive policy formulation in other areas of public responsibility could be informed by policy consequences perceived by the members of the Sub-cabinet for Human Services, potentially increasing overall policy coherence.

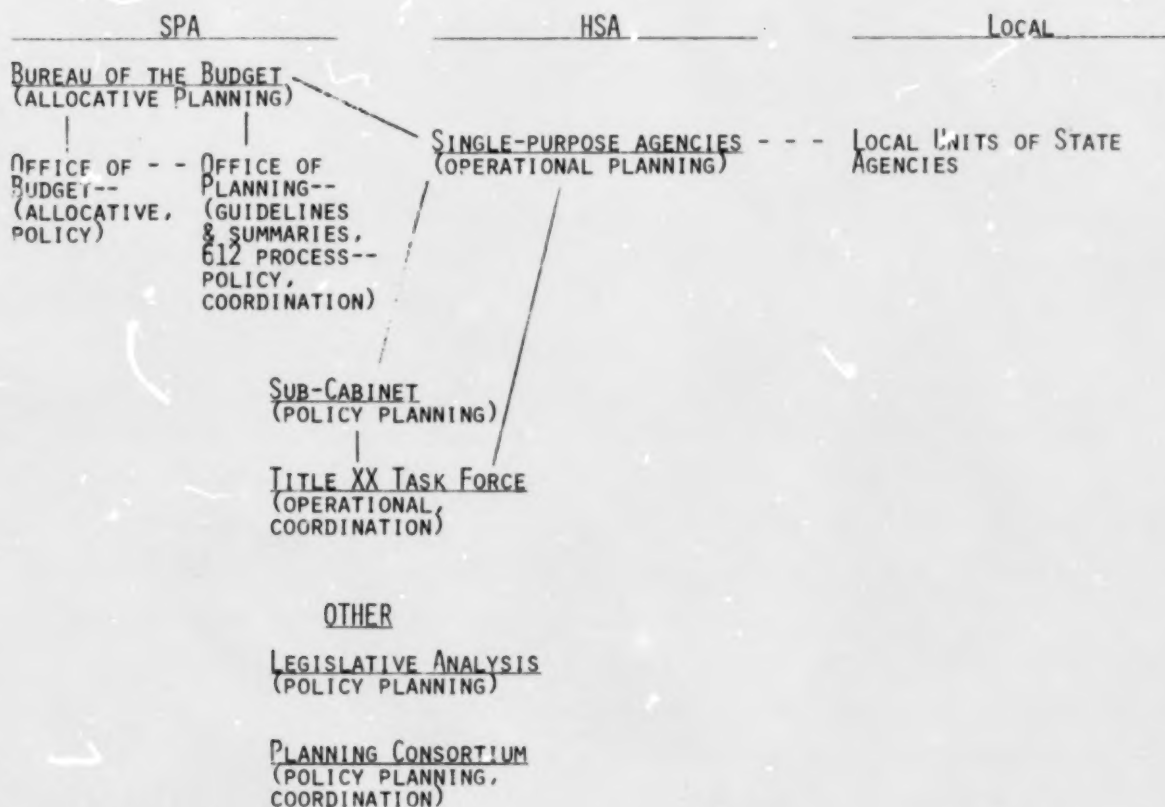
These learning outcomes would be accompanied, it was presumed, by decreasing resistance

among the agencies to complying with state HSP initiatives.

Two other features in the state are of particular interest, given the nature of Illinois' HSP. One is the existence of an active partisan staff for the Human Resource Committee of the State Assembly. Although HB 612 was passed as an aid to the legislature it is acknowledged by all parties to be a tool for the executive branch of the government. That leaves legislators dependent on the agencies for data needed as the basis for drafting or acting on proposed legislations, and on the non-partisan Legislative Reference Bureau for uniformity of content. As a check on the executive branch partisan analysts do original research on issues, provide background on proposed legislation, and draft new legislation. This serves as an avenue for interested publics to influence human resource appropriations and policy; it is, by tradition, a highly partisan process.

The other feature is the Planning Consortium for Children's Services in Illinois. This unique organization is a voluntary association of member agencies and special interest groups dedicated to improving the effectiveness and efficiency of services to children through improved coordination of private and public efforts. When the Planning Consortium was formed, its Board of Directors set some broad priority areas. Task forces made up of representatives from member agencies, experts, and interest groups were organized around these areas by the Board. Each task force studied the specific problems, resources, and interrelationships involved in the area, and identified what was at issue. Then it proceeded to research alternative solutions through its own network (members) plus other sources expected to yield relevant data. From the solutions generated the task force stated its preferences, with rationales, and began the development of strategies for influencing decision-making. Usually each task force yields a variety of 'paper products' (position papers, recommendations, letters, testimony, surveys) to various audiences (legislators, agencies, Bureau of the Budget, general public). This organization is supported primarily by the member agencies (private and public) and represents an avenue for the articulation of preferences and interests related to this one segment of the population (children). Formed in 1972 as an agency-initiated expression of concern for coordination of services, at the time of the interviews the PC was negotiating a role in the 612 process of summarizing the agencies' program options related to children's services. The PC has been a vehicle for agency learning about other agencies' work and about the concerns of various publics; its involvement in the policy analysis aspects of the 612 summaries would presumably give increased validity and legitimization to the combined options, and would further encourage efforts toward shared programming.

FIGURE 2. THE STRUCTURE OF HUMAN SERVICE PLANNING IN ILLINOIS



An overview of human service planning in Illinois is presented schematically in Figure 2. It should be emphasized that this represents only selected aspects of planning that were reported at the time of the site visits. It does not include the details of BOB planning, nor agency planning, nor local planning.

Kentucky

Human services in Kentucky are integrated under an umbrella agency, the Department of Human Resources (DHR). This agency is responsible for developing policy, budget, and programs for a wide range of services. In order to carry out these responsibilities for the state it has initiated a multi-purpose planning process that places heavy emphasis on inputs from the local program units, where services are administered. Called a 'top-down bottom-up' process, the process begins with the Office of Policy and Budget under the Secretary of Human Resources sending out budget guidelines and

priority allocation pattern to each of the four operating bureaus of the department-- the top-down part. Each bureau then follows a bottom-up budget aggregation, with budgets from local units aggregated at the regional level and reconciled with sub-program allocation priorities there and again at the state level by program priorities. Final reconciliations between priorities and submitted budgets are made by the Secretary.

A concurrent planning and budgeting system is initiated from the Office for Policy and Management in the Kentucky Department of Finance and Administration. Planning guidelines are issued here for use by the area development districts (regions) in preparing an overall plan for services that accommodates federal categorical plans (Title XX, CETA, Aging, etc.) plus state-funded services. Since the regions are also the location of other planning efforts (i.e. physical and economic development planning), opportunity for designing human services to fit the larger picture of development is ideal. With technical assistance from various state offices, the area development districts prepare comprehensive regional plans which are sent to the state Office of Local Government. This agency is also part of the Department of Finance and Administration, and functions as a broker between the regions and the state agencies. It checks each region's plan to ensure that 1) state and local funds are used to the best advantage as match for securing federal dollars, and 2) the plan reflects state priorities. Then the regional plans are passed along to the state budget staff for inclusion in the state fiscal plan.

This dual planning system theoretically permits the Department of Human Resources to maintain close management of internal operations and allocations through aggregation of inputs up the various program ladders, while the Department of Finance and Administration maintains managerial oversight of the relationships between regional plans and state policy priorities through aggregation from the area development districts. It was suggested by some informants that parts of the process tended to be by-passed. Two reasons were cited for this:

- 1) the effort required at the regional level for preparation of federal categorical plans (e.g. CETA, Aging) and plans for DHR Bureaus leaves little energy for cross-program coordination, although the regions' responsibilities for the A-95⁵ clearinghouse function were acknowledged to be a useful mechanism for coordination; and
- 2) local agency involvement in the planning process tends to be negligible, largely because the 'coloring books' sent out from Frankfort leave little room for local options.

⁵OMB Circular A-95, which calls for sub-state review and comment and state approval of plans submitted for a wide range of federal programs.

Nevertheless, local officials elected to the area development district boards have a significant opportunity to express preferences within the allocation priorities and planning guidelines sent down by the state offices. Citizen participation again comes into play when statewide plans are submitted at public hearings for comment and suggested revisions.

A consistent comment by planners in the operating bureaus of Human Resources, in the Secretary's office, and in the Department of Finance and Administration was that planning should be an integral part of management, and that there should be no 'closet planners' on board. This was taken to mean that planning should be oriented to learning how to deliver services at less cost, with less duplication, and without diminishing quality. The significant choices as to what should be--i.e. policy planning--are outlined by top administrators in the state departments. (In the DHR the Executive Policy Committee is composed of the heads of the four Bureaus, the Secretary, and the head of the Office of Policy and Planning.)

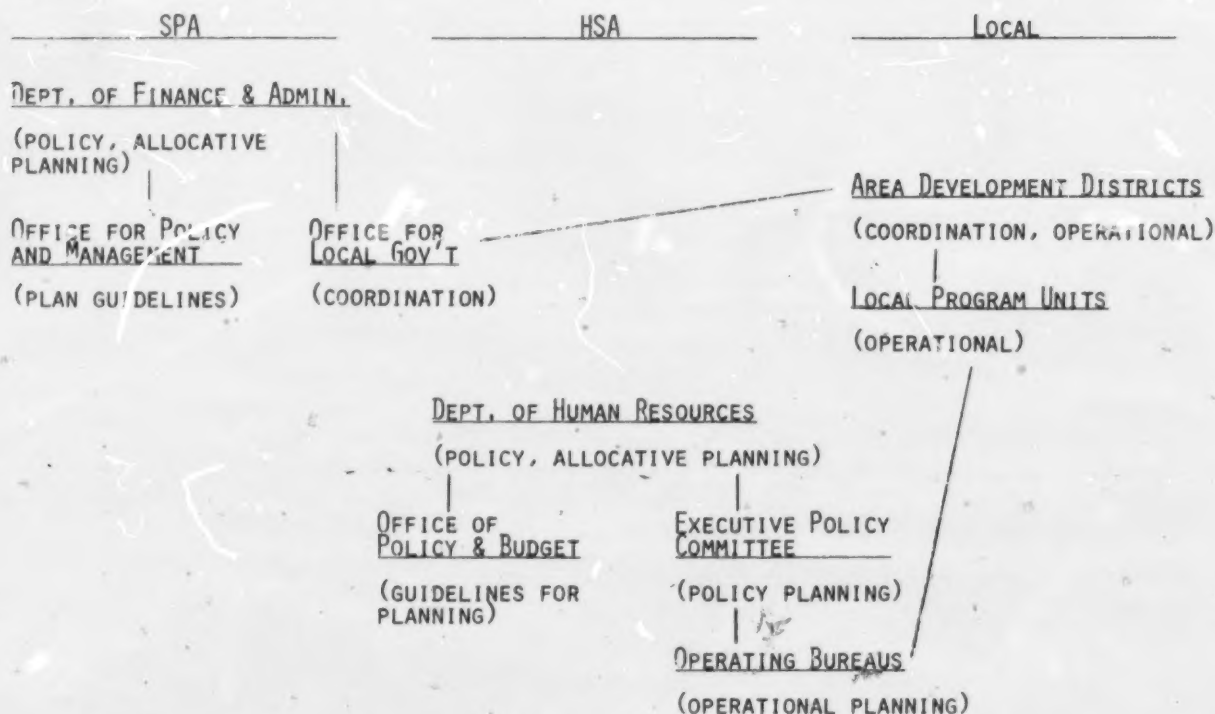
Following these choices departmental planners make up the 'coloring books' for program planners at state and regional level to fill in, with participation from interested publics. The choices available in the bottom-up process are thus highly constrained but very practical. "Locals propose, state offices dispose", as one official put it. According to the observation of one privately-employed planner, the state does not engage in 'real' planning, not in theory-minded, strategic (problem-solving), or policy analytic planning. According to planners within the system, the process is designed to learn how best to manage the resources available. Each Bureau is relatively autonomous in its program (operational) planning efforts, as long as it remains within its approved allocations. Plans are developed to be used--to integrate operations, allocations, and policy--and not to lie on a shelf.

A schematic representation of Human Service Planning in Kentucky is shown in Figure 3.

Massachusetts

A third pattern for the organization and delivery of human services is found in Massachusetts. There a number of line agencies are each responsible for an area of human services (e.g. public health, mental health, public welfare, social services, youth services). The Legislature turned down a bill in the early '70's to integrate the agencies into one umbrella organization at the state level. Coordination of the various services is achieved by the Executive Office of Human Services (EOHS), a Secretariat with no line authority, but exercising leverage on the agencies through the budgeting process. At the local level a coordinated approach to the delivery of

FIGURE 3. HUMAN SERVICE PLANNING IN KENTUCKY



services is also being developed.

The greatest impetus for human service planning in Massachusetts comes from the EOHS. Under its auspices four broad policy committees have been formed, each cutting across several agencies. These policy groups are composed of the agency Commissioners and/or high-level staff whom they may appoint, convened by the Secretary or Assistant Secretary, and staffed by EOHS planners. By involving the Commissioners in policy formulation, consensus among the agencies is achieved.⁶ It is assumed that staff will act uniformly in implementation, thus building coordination through this unified policy approach. As an EOHS official put it, "We have the power to force agencies to address the issues but not to force conformity to the solutions."

Top management has limited time to devote to the in-depth analysis of issues and solutions. In order to avoid having EOHS planners do all the work involved in planning/learning, and run the risk of the Commissioners rejecting ideas that are not their own,

⁶ It was also noted that by having everyone at the table the Governor's impact can be introduced--enabling all actors to learn the limits imposed on their deliberations from that source.

task forces have been organized around major topics of concern to each policy committee. The Health Policy Group, for instance, has task forces around Long-Term Care, Acute Care and Ambulatory Care. These task forces are composed of lower-level agency administrators and staff who are more directly involved in these topics on a day-to-day basis. In many cases the task forces spin off sub-committees to work on particular aspects of a topic, such as standards and criteria for health care. In each case agency staff--often representing 5 or 6 or more agencies--do the work of the committee. The learning strategy is designed so that involvement of various levels of staff will:

- 1) stimulate awareness of top-level concerns and policies among many levels of the agencies;
- 2) expose staff from each agency to the problems and concerns of other agencies;
- 3) uncover problems arising in the implementation of program and policy;
- 4) lead to problem resolution with opportunity to 'kick upstairs' for policy decisions those solution alternatives that are not mutually agreeable at a lower management level;
- 5) educate the players as to roles and relationships of each to the other;
- 6) create mutual expectations for the management and development of programs.

The process begins with an issue (not a clinical, but a management or policy issue) identified by a policy committee. Once it is brought to a task force or sub-committee for diagnosis and information, the work group engages in appropriate information gathering, and prepares reports on their findings and recommendations. Often reports are routed not only to the policy committee for approval, but also to other task forces and sub-committees whose work they affect. It is recognized that the groups cannot make rules, but they can suggest and persuade by mutual expectations. There may be no more authority through the use of these work groups, but there is more commitment. This general strategy of addressing issues as a means of fostering voluntarily coordinated implementation of plans is a model which appears to have been adopted in several of the agencies.

Concern for data coherence and uniformity varies across the agencies; experience with and willingness to develop information systems is also variable. This variability has led the Executive Office of Human Services to approach the matter of a single management system for all agencies very cautiously even though the Executive Office of Administration and Finance and the Governor (who is very management-oriented) are supportive of such an effort. At this point EOHS has developed a program monitoring system which includes an annual inventory of current program status from each agency, a monthly report to the Secretary (which may yield issues to be addressed to the policy committees), quarterly reports to the Governor's Management Task Force, and reports of

follow-up on recommendations. Ostensibly to keep the Secretary informed so that EOHS can represent the agencies effectively with the Governor and the Legislature, the program monitoring requirements help each agency to learn the expectations of the state which it is to meet, and sets minimal standards for evidencing that learning. Eventually, it is hoped, both fiscal monitoring and program evaluation will be standard operating procedures for all agencies, following common formats and using standardized data bases. The EOHS does not have the authority to enforce this; it relies on technical assistance offered to agencies by EOHS staff as a means of encouraging the adoption of the idea by the agencies.

While these state agency planning/learning efforts are a part of the picture, there is another concurrent aspect that links the local level to the state. Massachusetts is divided into 40 areas for the delivery of services, and these areas make up six regions. At the area level each agency has been organized as an independent structure, as contrasted with the coordinated nature of the agencies at the state level. It is the goal of the state that a coordinated human service planning and delivery system be developed in each area for

- 1) generation of valid data regarding needs and existing services;
- 2) coordination of state agencies at the area level;
- 3) coordination with special education programs and other local agencies;
- 4) integration of services to clients from responsible agencies on a decentralized basis."⁷

A number of planning efforts have been set in place to accomplish these objectives. At the state level an Area Strategy Committee (following the pattern of involving top-level management) has been formed to consider policy related to area strategy. Under that policy committee is a Planning Task Force composed of agency and EOHS planners whose task is to plan for area planning. More specifically, they are designing a common language, framework for needs assessment, priority-setting process, and budget format. Their activities are analogous to that of a curriculum committee, determining what agencies should learn and in large part how they should go about it.

At the local level each service area has a Planning Team composed of managers for the Department of Mental Health, the Department of Public Welfare, the Massachusetts Rehabilitation Commission, the Commission for the Blind, the Office for Children, and Special Education. This team will jointly implement the needs assessment, resource inventory, priority-setting, and monitoring and evaluation recommendations from the Planning Task Force, with joint budgeting expected later. Area efforts will be supported by Regional Service Planning Teams, made up of the regional directors of the agencies

⁷"Summary of Massachusetts Area Strategy", Executive Office of Human Services, March 28, 1977, p.3.

represented in the Area Service Planning Teams.

These planning/learning efforts focus on descriptive (operational and allocative) questions more than on prescriptive (policy) questions. The latter are the primary domain of planning efforts at the state level, although it is clear that the state includes in its domain policies of implementation as well as policies of allocation. The former were to include not only a strategy for learning how to make the best use of resources at the local level, but also the development of plan components from which federally-required plans (e.g. Title XX) could be aggregated at regional and state levels.

The diagram of Massachusetts' human service planning (Figure 4) does not indicate any particular means for public participation in the planning process. It may be assumed that the agencies are in compliance with mandates for public involvement. Citizen input was not a primary interest of persons interviewed at the time of the site visit--and in fact was conspicuous by its absence. The major strategy of human service planners in Massachusetts seemed to be to develop a plan concomitantly with techniques of putting the plan in place. The integration of planning and implementation--learning to do and learn by doing--was its hallmark.

FIGURE 4. HUMAN SERVICE PLANNING IN MASSACHUSETTS



Implications for Adult Education Research

Examination of human service planning as a collective learning effort is not antithetical to current views in the literature of planning.⁸ However, use of the community learning concept, as defined by the Boyd and Apps matrix, encourages the formulation of questions somewhat different from those of other fields. For example, the focus on community as beneficiary of learning stimulates one to ask:

- What is the community's perceived 'need to know' around which HSP is organized?
- How comprehensive in terms of the kinds of questions asked or the scope of services included is HSP?
- In what form and in what location will information regarding human services be most useful to the community?
- In what ways, if any, is learning from HSP related to or synthesized with the learning obtained from other planning efforts of the community?

The focus on community as participant in learning raises other questions, such as:

- What strategy of involvement in planning/learning is likely to accomplish the learning tasks intended in HSP?
- What rules for the organization of the community (i.e. who can do what?) affect the ways in which HSP can be organized?
- What assumptions are made regarding the potential contributions of various publics to the HSP tasks?
- Who should be in charge of the HSP learning process? How should planning/learning be controlled?

It is often difficult to find evidence that the learning process--in the sense of an intentional, calculated effort rather than incidental learning--is underway. An even more perplexing question is, "How does one know that community learning from HSP or other process has occurred?" Is the fact that a decision is made evidence of learning? In order to justify a decision as evidence of learning, perhaps one would require from decision-makers:

- awareness of the contribution of planning to the decision-making process; and/or
- awareness of decision alternatives, and the issues and interests involved; and/or
- consciousness of criteria for evaluating decision alternatives; and/or
- rationale for the decision that was made; and/or
- understanding of the process by which decision-making occurred and could be altered.

⁸See, for example, Etzioni, Amitai, *THE ACTIVE SOCIETY*. New York: Free Press, 1968; Michael, Donald N., *ON LEARNING TO PLAN--AND PLANNING TO LEARN*. San Francisco: Jossey-Bass, 1973; Schon, Donald A., *BEYOND THE STABLE STATE*. New York: Norton, 1971.

Other possible evidences of learning from HSP include such tangible outputs as recommendations, plans, guidelines, for planning, minutes of planning deliberations, recordings of public meetings at which planners' testimony is introduced, legislation, or regulations. Much as the completion of school work is an inadequate measure of individual learning, the existence of trace artifacts offers limited evidence as to the extent or duration or application of community learning.

Changes in a community's human services may also offer evidence of learning through HSP. Increased predictability of service outcomes, fewer unintended or unanticipated effects, greater interagency coordination, improved ratio of benefits to costs, broader acceptance of and involvement in HSP--all of these may indicate community learning. The community's ability to recognize its own learning is a critical aspect of its capacity to plan for and to adapt its planning/learning processes.

At the present state of knowledge it is illuminating to describe existing ways in which HSP may be organized to accomplish different communities' learning tasks. Comparative studies, of different strategies to accomplish similar ends, or of the effect of community structure on HSP strategy, or of changes in a single community's HSP strategies over time, represent a next effort. Ultimately one might hope that it would be possible to achieve a sufficient understanding of the planning/learning process and adequate conceptualization of planning/learning outcomes so that evaluation of alternative approaches might be undertaken. From the experience with this project, we are not yet there.